



Department of Medical Assistance Services
600 East Broad Street, Suite 1300
Richmond, Virginia 23219

www.dmas.virginia.gov

MEDICAID MEMO

TO: All Mental Health and Mental Retardation Agencies,
Providers of Case Management Waiver Services, Enrolled
Service Facilitators under Medicaid Waivers, and Medicaid
Recipients Receiving Consumer-Directed (CD) Services

FROM: Patrick W. Finnerty, Director
Department of Medical Assistance Services (DMAS)

MEMO Special
DATE 8/1/2005

SUBJECT: Rate Increases & New Patient Pay Payroll Procedure for Consumer-Directed (CD) Services – Effective July 1, 2005

The purpose of this memorandum is to notify consumer-directed (CD) service providers and recipients of rate increases and the process for paying patient pay amounts.

RATE INCREASE

As of July 1, 2005, the hourly rate for consumer-directed personal attendant/respite/companion services increased to \$10.61 for the Northern Virginia rate and to \$8.19 for the Rest of the State rate.

PATIENT PAY

Some CD service recipients have a patient pay amount that is to be paid to their attendants on the first of each month. (Recipients can contact their CD Service Facilitator to find out if they have a patient pay or if they simply need more information about patient pay. Recipients and providers may also send their patient pay questions via email to CDFAS@dmas.virginia.gov.)

The entire patient pay amount must be paid before DMAS, acting as the Fiscal Agent, will pay toward the recipient's care. Remember that DMAS cannot pay the recipient's attendants until the recipient has paid the entire patient pay amount. It is possible that another waiver service provider will collect the recipient's patient pay amount. This information is noted on the Patient Information Form (DMAS-122) from the recipient's CD Service Facilitator or Case Manager. If another waiver service provider collects the patient pay amount, the Fiscal Agent will not deduct the patient pay amount from the attendant's payroll amount. If the recipient is unsure about who receives the patient pay amount, the recipient should contact the CD Service Facilitator or Case Manager.

The recipient's patient pay amount must be paid to the attendant who is providing the recipient with CD services. Refer to the Consumer-Directed Services Pay Schedule (attached) to view the payroll periods when a patient pay is due. The example below describes the payment process for multiple attendants.

NOTE: To calculate net pay, multiply gross wages by .0765 (Medicare and Social Security withholdings) and subtract that amount from the gross wages. This will equal the net pay.

Example: The recipient's patient pay amount is more than the amount the primary attendant would make in the first two weeks of care each month, and the recipient has more than one attendant.

The recipient has a patient pay of \$600. The recipient's primary attendant has a net pay (regular pay minus deductions for taxes) of \$400 for the payroll period for which the patient pay is due. The recipient must pay the primary attendant \$400 and, if the recipient has a second attendant, the recipient must pay the second attendant the other \$200 (\$600 patient pay - \$400 to primary attendant = \$200 to secondary attendant). After the full patient pay is completed, DMAS will pay the remaining amount for the month. If needed, the patient pay will be deducted from the third attendant (if applicable) until the patient pay is met for the month.

ATTENDANT CHANGES

Recipients should call 1-804-786-0176 (Richmond area and out-of-state long distance) or 1-866-225-1768 (in-state, toll-free long distance) and leave a message if they need to make changes regarding primary and secondary attendants. When a CD service recipient sends a new hire packet, the recipient should indicate the order of attendants by writing "primary" or "secondary" next to each attendant's last name.

Attached Number of Pages: (1)

CONSUMER-DIRECTED SERVICES PAY SCHEDULE

The pay periods will begin and end on the following dates. The dates with the black background and white text indicate the payroll periods that include the first of the month. If you are responsible for paying your attendant(s) a patient pay amount, it is due when your attendant(s) receives pay stubs for the periods highlighted in black below.

2005

PERIOD BEGINNING	PERIOD ENDING
07-07-05	07-20-05
07-21-05	08-03-05
08-04-05	08-17-05
08-18-05	08-31-05
09-01-05	09-14-05
09-15-05	09-28-05
09-29-05	10-12-05
10-13-05	10-26-05
10-27-05	11-09-05
11-10-05	11-23-05
11-24-05	12-07-05
12-08-05	12-21-05
12-22-05	01-04-06

2006

PERIOD BEGINNING	PERIOD ENDING
1-5-06	1-18-06
1-19-06	2-1-06
2-2-06	2-15-06
2-16-06	3-1-06
3-2-06	3-15-06
3-16-06	3-29-06
3-30-06	4-12-06
4-13-06	4-26-06
4-27-06	5-10-06
5-11-06	5-24-06
5-25-06	6-7-06
6-8-06	6-21-06
6-22-06	7-5-06

PERIOD BEGINNING	PERIOD ENDING
7-6-06	7-19-06
7-20-06	8-2-06
8-3-06	8-16-06
8-17-06	8-30-06
8-31-06	9-13-06
9-14-06	9-27-06
9-28-06	10-11-06
10-12-06	10-25-06
10-26-06	11-8-06
11-9-06	11-22-06
11-23-06	12-6-06
12-7-06	12-20-06
12-21-06	1-3-07

If you have questions regarding pay periods, please call your Service Facilitator or Case Manager.